Not Yet Assigned 10 / 54 / 2 PT 2003/000380 39185-2	U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.50) INTERNATIONAL APPLICATION NO. ATTORNEYS DOCKET NUMBER											
E a) Basic national fee	Not Yet Assi	igned 10/	542.		039185-2							
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(excluding sequence listing or computer program listing filed in an electronic medium.) The fee is \$250 on each additional \$9 or function thereof. Total Sheets					·	\$100	0.00	·				
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earliest chaimed priority date (37 CFR 1.92(e)). CLAMS NUMBER FILED NUMBER EXTRA RATE Total claims 10 - 20 = 0 x \$50.00 \$ Independent claims 1 - 3 = 0 x \$50.00 \$ MULTIPLE DEPENDENT CLAIM(S) (if applicable) +\$360.00 \$ TOTAL OF ABOVE CALCULATIONS = \$1000.00 Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½. SUBTOTAL = \$1000.00 Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)). TOTAL NATIONAL FEE = \$1000.00 Fee for recording the enclosed assignment (37 CFR 1.21), The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property + \$ TOTAL FEES ENCLOSED = \$ Amount to be redunded: Amount of \$ \$ Amount to be charged: \$1000.00 \$ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 19-2380, A duplicate copy of this sheet is enclosed. Description of the conditional fees which may be required, or credit any overpayment to Deposit Account No. 19-2380, A duplicate copy of this sheet is enclosed. Description of the conditional fees which may be required, or credit any overpayment to Deposit Account No. 19-2380, A duplicate copy of this sheet is enclosed. Description of the conditional fees which may be required, or credit any overpayment to Deposit Account No. 19-2380, A duplicate copy of this sheet is enclosed. Description of the conditional fees which may be be required, or credit any overpayment to Deposit Account No. 19-2380, A duplicate copy of this sheet is enclosed. Description of the conditional fees which may be required, or credit any overpayment to Deposit Account No. 19-2380, A duplicate copy of this sheet is enclosed. Description of the conditional fees which may be required, or credit any overpayment to Deposit Account No. 19-2380, A duplicate copy of this sheet is enclosed. Description of the conditional fees which may be requ	8 - 100 =	0 /50 =			x \$250.00	\$						
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Type or Printed Name Signature David S. Safran, Reg. No. 27,997 Signature January 9, 2006											
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.											
□ *Total of forms are submitted.			-								



CERTIFICATION

I, S V Raman, of 23/52 Gariahat Road, Kolkata – 700 029, do hereby certify that the following 9 pages are a true and correct English translation of the original German document presented under reference number PCT/AT2003/000380.

S V Raman

Authorized Translato

Kolkata, 24 June 2005